



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9458

SERIAL NUMBER 09/297,237	FILING DATE 05/17/1999 RULE	CLASS 052	GROUP ART UNIT 3635	ATTORNEY DOCKET NO.	
APPLICANTS HARTMUT EICHINGER, ROTTINGEN, GERMANY; ** CONTINUING DATA ***** This application is a 371 of PCT/DE97/02793 11/29/1997 ** FOREIGN APPLICATIONS ***** GERMANY 196 50 467.8 12/05/1996					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>Allowance</u> Acknowledged <u>Examiner's Signature</u> Initials		STATE OR COUNTRY GERMANY	SHEETS DRAWING 4	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
ADDRESS EDWIN D SCHINDLER FIVE HIRSCH AVENUE PO BOX 966 CORAM, NY 117270966					
TITLE PLAY HOUSE MADE OF PREFABRICATED PARTS					
FILING FEE RECEIVED 485	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/297,237	FILING DATE 05/17/99	CLASS 446	GROUP A. UNIT 3712	ATTORNEY DOCKET NO.
-----------------------------	-------------------------	--------------	-----------------------	---------------------

APPLICANT

HARTMUT EICHINGER, ROTTINGEN, FED REP GERMANY.

CONTINUING DOMESTIC DATA***

VERIFIED

PS

371 (NAT'L STAGE) DATA***

VERIFIED THIS APPLN IS A 371 OF PCT/DE97/02793 11/29/97

PS

FOREIGN APPLICATIONS***

VERIFIED FED REP GERMANY 196 50 467.8 12/05/96

PS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/04/99

Foreign Priority claimed. 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 4	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
Verified and Acknowledged <u>PS</u> Examiner's Initials _____ Initials _____				

ADDRESS	EDWIN D SCHINDLER FIVE HIRSCH AVENUE PO BOX 966 CORAM NY 11727-0966
---------	--

TITLE	PLAY HOUSE MADE OF PREFABRICATED PARTS
-------	--

FILING FEE RECEIVED \$485	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------	---	---